

**Recipient Committee
Campaign Statement
Cover Page - Part 2**

COVER PAGE - PART 2

CALIFORNIA FORM 460

Page 2 of 32

5. Officeholder or Candidate Controlled Committee

NAME OF OFFICEHOLDER OR CANDIDATE Gloria Soto	NAME OF BALLOT MEASURE
OFFICE SOUGHT OR HELD (INCLUDE LOCATION AND DISTRICT NUMBER IF APPLICABLE) City Council Member RESIDENTIAL/BUSINESS ADDRESS (NO. AND STREET) 818 W Dante Drive	BALLOT NO. OR LETTER DISTRICT NO.: 3 CITY STATE ZIP Santa Maria, CA 93458
JURISDICTION	
<input type="checkbox"/> SUPPORT <input type="checkbox"/> OPPOSE	

Related Committees Not Included in this Statement *List any committees not included in this statement that are controlled by you or are primarily formed to receive contributions or make expenditures on behalf of your candidacy*

COMMITTEE NAME	I.D. NUMBER	CONTROLLED COMMITTEE? <input type="checkbox"/> YES <input type="checkbox"/> NO	NAME OF OFFICEHOLDER OR CANDIDATE	OFFICE SOUGHT OR HELD	SUPPORT <input type="checkbox"/> OPPOSE
NAME OF TREASURER	STREET ADDRESS (NO P.O. BOX)	STATE	ZIP CODE	AREA	SUPPORT <input type="checkbox"/> OPPOSE
COMMITTEE ADDRESS					SUPPORT <input type="checkbox"/> OPPOSE
CITY CODE/PHONE					SUPPORT <input type="checkbox"/> OPPOSE
COMMITTEE NAME	I.D. NUMBER	CONTROLLED COMMITTEE? <input type="checkbox"/> YES <input type="checkbox"/> NO	NAME OF OFFICEHOLDER OR CANDIDATE	OFFICE SOUGHT OR HELD	SUPPORT <input type="checkbox"/> OPPOSE
NAME OF TREASURER	STREET ADDRESS (NO P.O. BOX)	STATE	ZIP CODE	AREA	SUPPORT <input type="checkbox"/> OPPOSE
COMMITTEE ADDRESS					SUPPORT <input type="checkbox"/> OPPOSE
CITY CODE/PHONE					SUPPORT <input type="checkbox"/> OPPOSE

6. Primarily Formed Ballot Measure Committee

NAME OF OFFICEHOLDER OR CANDIDATE	NAME OF BALLOT MEASURE
Glory Soto	
OFFICE SOUGHT OR HELD (INCLUDE LOCATION AND DISTRICT NUMBER IF APPLICABLE)	JURISDICTION
LOCATION: City of Santa	BALLOT NO. OR LETTER
DISTRICT NO.: 3	JURISDICTION
	<input type="checkbox"/> SUPPORT <input type="checkbox"/> OPPOSE

Identify the controlling officeholder, candidate, or state measure proponent, if any.

NAME OF OFFICEHOLDER, CANDIDATE, OR PROPONENT
DISTRICT NO. IF ANY

7. Primarily Formed Candidate/Officeholder Committee List names of officeholder(s) or candidate(s) for which this committee is primarily formed.

NAME OF OFFICEHOLDER OR CANDIDATE	OFFICE SOUGHT OR HELD	SUPPORT <input type="checkbox"/> OPPOSE
NAME OF OFFICEHOLDER OR CANDIDATE	OFFICE SOUGHT OR HELD	SUPPORT <input type="checkbox"/> OPPOSE
NAME OF OFFICEHOLDER OR CANDIDATE	OFFICE SOUGHT OR HELD	SUPPORT <input type="checkbox"/> OPPOSE
NAME OF OFFICEHOLDER OR CANDIDATE	OFFICE SOUGHT OR HELD	SUPPORT <input type="checkbox"/> OPPOSE
NAME OF OFFICEHOLDER OR CANDIDATE	OFFICE SOUGHT OR HELD	SUPPORT <input type="checkbox"/> OPPOSE

**Campaign Disclosure Statement
Summary Page**

SUMMARY PAGE

Amounts may be rounded
to whole dollars.

SEE INSTRUCTIONS ON REVERSE
NAME OF FILER

Gloria Soto for Santa Maria City Council District 3 2018

Statement covers period from <u>01/01/2018</u>	through <u>09/22/2018</u>	Page <u>3</u> of <u>32</u>
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I.D. NUMBER
1407086

Contributions Received

	Column A TOTAL THIS PERIOD (FROM ATTACHED SCHEDULES)	Column B CALENDAR YEAR TOTAL TO DATE
1. Monetary Contributions	Schedule A, Line 3 \$ <u>17,154.00</u>	\$ <u>17,154.00</u>
2. Loans Received	Schedule B, Line 3 <u>500.00</u>	<u>500.00</u>
3. SUBTOTAL CASH CONTRIBUTIONS	<u>17,654.00</u>	<u>17,654.00</u>
4. Nonmonetary Contributions	<u>.00</u>	<u>.00</u>
5. TOTAL CONTRIBUTIONS RECEIVED	<u>17,654.00</u>	<u>17,654.00</u>

Expenditures Made

6. Payments Made	Schedule E, Line 4 \$ <u>9,550.84</u>	\$ <u>9,550.84</u>
7. Loans Made	Schedule H, Line 3 <u>.00</u>	<u>.00</u>
8. SUBTOTAL CASH PAYMENTS	<u>Add Lines 6 + 7</u> \$ <u>9,550.84</u>	<u>9,550.84</u>
9. Accrued Expenses (Unpaid Bills)	Schedule F, Line 3 <u>.00</u>	<u>.00</u>
10. Nonmonetary Adjustment	Schedule C, Line 3 <u>.00</u>	<u>.00</u>
11. TOTAL EXPENDITURES MADE	<u>Add Lines 8 + 9 + 10</u> \$ <u>9,550.84</u>	<u>9,550.84</u>

Current Cash Statement

12. Beginning Cash Balance	<i>Previous Summary Page, Line 16</i> \$ <u>.00</u>	To calculate Column B, add amounts in Column A to the corresponding amounts from Column B of your last report. Some amounts in Column A may be negative figures that should be subtracted from previous period amounts. If this is the first report being filed for this calendar year, only carry over the amounts from Lines 2, 7, and 9 (if any).
13. Cash Receipts	<i>Column A, Line 3 above</i> <u>17,654.00</u>	<u>17,654.00</u>
14. Miscellaneous Increases to Cash	<i>Schedule I, Line 4</i> <u>25.10</u>	<u>25.10</u>
15. Cash Payments	<i>Column A, Line 8 above</i> <u>9,550.84</u>	<u>9,550.84</u>
16. ENDING CASH BALANCE	<i>Add Lines 12 + 13 + 14, then subtract Line 15</i> \$ <u>8,128.26</u>	<u>8,128.26</u>

If this is a termination statement, Line 16 must be zero.

17. LOAN GUARANTEES RECEIVED

Schedule B, Line 2 \$.00

Cash Equivalents and Outstanding Debts

18. Cash Equivalents	See instructions on reverse	\$ <u>.00</u>
19. Outstanding Debts	<i>Add Line 2 + Line 9 in Column B above</i>	\$ <u>500.00</u>

FPPC Form 460 (Jan 2016)
FPPC Advice: advice@fppc.ca.gov (866)275-3772
www.fppc.ca.gov

**Calendar Year Summary for Candidates
Running in Both the State Primary and
General Elections**

20. Contributions \$.00

21. Expenditures \$.00

22. Cumulative Expenditures Made*
(If Subject to Voluntary Expenditure Limit)

**Expenditures Limit Summary for State
Candidates**

**Amounts in this section may be different from amounts reported in Column B.*

**CALIFORNIA 460
FORM**

Schedule A
Monetary Contributions Received

Amounts may be rounded
to whole dollars.

SCHEDULE A
CALIFORNIA 460
FORM

SEE INSTRUCTIONS ON REVERSE
NAME OF FILER

Gloria Soto for Santa Maria City Council District 3 2018

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE	IF INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
07/08/2018	Juan Pablo Angulano 206 North Curryer Street Santa Maria, CA 93458	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Direct Billing Administrator Industrial Medical Group of Santa	100.00	100.00	
07/17/2018	Virginia Souza 2252 Fallen Leaf Drive Santa Maria, CA 93455	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Investment advisor Morgan Stanley	250.00	250.00	
07/18/2018	Ken Saxon 1857 E Las Tunas Rd Santa Barbara, CA 93103	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	President Leading from Within	500.00	500.00	
07/19/2018	Christine Lyon 1911 Coyote Cir Santa Barbara, CA 93108	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Retired	250.00	250.00	
07/23/2018	Diana Perez 351 Siller Ln Santa Maria, CA 93455	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Director Allan Hancock College	250.00	250.00	
					SUBTOTAL \$	1,350.00

Schedule A
Monetary Contributions Received

Amounts may be rounded
to whole dollars.

SCHEDULE A

CALIFORNIA 460
FORM

SEE INSTRUCTIONS ON REVERSE
NAME OF FILER

Gloria Soto for Santa Maria City Council District 3 2018

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE	IF INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
07/23/2018	Raymond Segura 912 South McClelland Street Santa Maria, CA 93454	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Retired	250.00	310.00	
07/26/2018	Willie Galvan 702 East El Camino Street Santa Maria, CA 93454	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Retired	100.00	100.00	
07/26/2018	High Sky Farm 1050 East Highway 246 Solvang, CA 93463	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		250.00	250.00	
07/31/2018	Kathryn Adams 705 E. Borges Drive Santa Maria, CA 93454	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Allan Hancock College Professor	200.00	300.00	
07/31/2018	David Dennis 416 East Hermosa Street Santa Maria, CA 93454	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Retired Retired	100.00	629.00	
						SUBTOTAL \$ 900.00

Schedule A
Monetary Contributions Received

Amounts may be rounded
to whole dollars.

SCHEDULE A
CALIFORNIA 460
FORM

NAME OF FILER Gloria Soto for Santa Maria City Council District 3 2018		Statement covers period from <u>01/01/2018</u> through <u>09/22/2018</u>	Page <u>6</u> of <u>32</u>
SEE INSTRUCTIONS ON REVERSE		I.D. NUMBER 1407086	

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE	IF INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
IND	COM	OTH	PTY	SCC		
07/31/2018	Helen Galvan 702 E El Camino St Santa Maria, CA 93454	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	100.00	100.00
07/31/2018	Renner Wunderlich 3099 Hidden Valley Ln Santa Barbara, CA 93108	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	300.00	300.00
08/01/2018	Elizabeth Cortez 910 Narratez Ct Santa Maria, CA 93458	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	250.00	250.00
08/03/2018	Aj Valenzuela 726 Flathead River Street Oxnard, CA 93036	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	50.00	100.00
08/08/2018	Anna DiStefano 1113 Plaza Del Monte Santa Barbara, CA 93101	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	250.00	250.00
					SUBTOTAL \$	950.00

Schedule A
Monetary Contributions Received

Amounts may be rounded to whole dollars.

Schedule A Monetary Contributions Received		CALIFORNIA 460 FORM			
		Statement covers period from <u>01/01/2018</u> through <u>09/22/2018</u>	Page <u>7</u> of <u>32</u>		
SEE INSTRUCTIONS ON REVERSE NAME OF FILER		I.D. NUMBER 1407086			
DATE RECEIVED		FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)		CONTRIBUTOR CODE	IF INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)
08/08/2018		Carlos Lopez 1383 Graham Street Simi Valley, CA 93065		<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	General construction Carlos Lopez
08/08/2018		Gloria Soto 818 W Dante Drive Santa Maria, CA 93454		<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Regional Development Coordinator Planned Parenthood
08/08/2018		Elsa Velasco 1556 Lark St Santa Maria, CA 93454		<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Emergency Care Technician Cottage Health Systems
08/08/2018		Alma Wilson 617 East Mariposa Way Santa Maria, CA 93454		<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Program Manager County of Santa Barbara
08/09/2018		Gary Clark 1835 Loma St Santa Barbara, CA 93103		<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Director of Capacity Building The Fund for Santa Barbara
					PER ELECTION TO DATE CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)
				200.00	200.00
				25.00	525.00
				100.00	199.00
				100.00	100.00
				250.00	250.00

SUBTOTAL \$ 675.00

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www.fppc.ca.gov
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Schedule A
Monetary Contributions Received

Amounts may be rounded to whole dollars.

Statement covers period from <u>01/01/2018</u> through <u>09/22/2018</u>		Page <u>8</u> of <u>32</u>	
NAME OF FILER		I.D. NUMBER <u>1407086</u>	
<p>SEE INSTRUCTIONS ON REVERSE</p> <p>to whole dollars.</p> <p>CALIFORNIA 460 FORM</p> <p>Statement covers period from <u>01/01/2018</u> through <u>09/22/2018</u></p> <p>I.D. NUMBER <u>1407086</u></p>			
Gloria Soto for Santa Maria City Council District 3 2018		IF INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER ID. NUMBER)	CONTRIBUTOR CODE	AMOUNT RECEIVED THIS PERIOD
08/09/2018	Samuel Duarte 322 South Ranch St Santa Maria, CA 93454	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	150.00
08/09/2018	Jack Gavin Consulting 3501 Telephone Road Santa Maria, CA 93454	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	100.00
08/10/2018	Cristina Gonzalez 2400 4th Avenue #605 Seattle, WA 98121	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	250.00
08/12/2018	Katit Novo 517 East Taylor Street Santa Maria, CA 93454	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	50.00
08/16/2018	Jeanne Sparks 2242 Fallen Leaf Dr Santa Maria, CA 93455-5734	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	100.00
		CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	
		PER ELECTION TO DATE (IF REQUIRED)	

SUBTOTAL \$ 650.00

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FPCC Form 480 (Jan/2016)
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Schedule A
Monetary Contributions Received

Amounts may be rounded
to whole dollars.

SCHEDULE A
CALIFORNIA 460
FORM

SEE INSTRUCTIONS ON REVERSE
NAME OF FILER

Gloria Soto for Santa Maria City Council District 3 2018

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE	IF INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF- EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
08/18/2018	Kalleen Corley 571 Security Ct Oceano, CA 93445	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Not employed Not employed	100.00	100.00	
08/18/2018	Richard Fracks 1603 Garden Street Santa Barbara, CA 93101	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Retired Retired	100.00	100.00	
08/20/2018	Patricia Solorio 224 Linda Drive Santa Maria, CA 93454	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Director of Grant Making The Fund for Santa Barbara	200.00	200.00	
08/24/2018	Feliciano Aguilar 313 East Las Flores Way Santa Maria, CA 93454	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Activist Association of Two-Way and Dual	100.00	100.00	
08/26/2018	Jenny Rude 1402 Bluebird St Santa Maria, CA 93454-7280	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Teacher Santa Maria-Bonita School District	100.00	100.00	
					SUBTOTAL \$	600.00

Schedule A
Monetary Contributions Received

Amounts may be rounded to whole dollars.

Statement covers period from <u>01/01/2018</u> through <u>09/22/2018</u>		Page <u>10</u> of <u>32</u>	
NAME OF FILER		I.D. NUMBER 1407086	
SEE INSTRUCTIONS ON REVERSE			
Gloria Soto for Santa Maria City Council District 3 2018			
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE	IF INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)
08/27/2018	Suzanne Valery 1734 Tierra Nueva Lane Oceano, CA 93445	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Director of Institutional Grants Allan Hancock College
08/29/2018	Kathryn Adams 705 E. Borges Drive Santa Maria, CA 93454	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Allan Hancock College Professor
08/29/2018	Daisy Basulto 213 West Bunny Avenue Santa Maria, CA 93458	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Organizer Future Leaders of America
08/29/2018	Luz Maria Cabral 1655 N Western Ave Santa Maria, CA 93458	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Not employed Not employed
08/29/2018	Tania Cabral 1655 N Western Ave Santa Maria, CA 93458	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Manager Uita, Inc
Subtotal \$		608.00	
Amounts may be rounded to whole dollars.			
CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)			
		150.00	150.00
AMOUNT RECEIVED THIS PERIOD			
		100.00	300.00
PER ELECTION TO DATE (IF REQUIRED)			
I.D. NUMBER 1407086			
CALIFORNIA 460 FORM			

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FPPC Form 460 (Jan/2016)
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Schedule A
Monetary Contributions Received

Amounts may be rounded
to whole dollars.

SCHEDULE A
CALIFORNIA
460
FORM

SEE INSTRUCTIONS ON REVERSE
NAME OF FILER

Gloria Soto for Santa Maria City Council District 3 2018

		Statement covers period		CUMULATIVE TO DATE		PER ELECTION TO DATE	
		from <u>01/01/2018</u>	through <u>09/22/2018</u>	AMOUNT RECEIVED THIS PERIOD	CALENDAR YEAR (JAN. 1 - DEC. 31)	(IF REQUIRED)	
				I.D. NUMBER			
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE	IF INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)		
08/29/2018	David Dennis 416 East Hermosa Street Santa Maria, CA 93454	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Retired	500.00	629.00		
08/29/2018	David Dennis 416 East Hermosa Street Santa Maria, CA 93454	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Retired	29.00	629.00		
08/29/2018	Katlie Novo 517 East Taylor Street Santa Maria, CA 93454	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Retired Sr. Graphic Designer Primus Group	60.00	110.00		
08/29/2018	Karla Ochoa 413 West Hermosa Street Santa Maria, CA 93458	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Psychologist SMBSD	400.00	400.00		
08/29/2018	Raymond Segura 912 South McClelland Street Santa Maria, CA 93454	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Retired Retired	60.00	310.00		
				SUBTOTAL \$	1,049.00		

Schedule A
Monetary Contributions Received

Amounts may be rounded to whole dollars.

SCHEDULE A
CALIFORNIA 460
FOBM

Statement covers period
from 01/01/2018 through 09/22/2018

SEE INSTRUCTIONS ON REVERSE
NAME OF E1 FB

Gloria Sotto for Santa Maria City Council District 3 2018

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE	IF INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	PER ELECTION TO DATE (IF REQU. RED)	
					CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	
08/29/2018	Elsa Velasco 1566 Lark St Santa Maria, CA 93454	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Emergency Care Technician Cottage Health Systems	99.00	199.00	
08/30/2018	David Parker 831 San Ysidro Lane Nipomo, CA 93444	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Retired Retired	100.00	100.00	
08/30/2018	The Pentavertite, Inc. 638 East Main Street Ventura, CA 93001	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		460.00	860.00	
08/30/2018	The Pentavertite, Inc. 638 East Main Street Ventura, CA 93001	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		400.00	860.00	
08/31/2018	Aj Valenzuela 726 Flathead River Street Oxnard, CA 93036	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Longshoreman Pacific Maritime Association	50.00	100.00	

SUBTOTAL \$ 1,109.00

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Schedule A
Monetary Contributions Received

Amounts may be rounded to whole dollars.

Statement covers period from <u>01/01/2018</u> through <u>09/22/2018</u>		Page <u>14</u> of <u>32</u>		CALIFORNIA 460 FORM																																											
				I.D. NUMBER 1407086																																											
<p>SEE INSTRUCTIONS ON REVERSE</p> <p>NAME OF FILER</p> <p>Gloria Soto for Santa Maria City Council District 3 2018</p> <table border="1"> <thead> <tr> <th>DATE RECEIVED</th> <th>FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)</th> <th>CONTRIBUTOR CODE</th> <th>IF INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)</th> <th>AMOUNT RECEIVED THIS PERIOD</th> <th>CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)</th> </tr> </thead> <tbody> <tr> <td>09/07/2018</td> <td>Planned Parenthood Action Fund 518 Garden Street Santa Barbara, CA 93101 ID: 1278950</td> <td><input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC</td> <td></td> <td>500.00</td> <td>500.00</td> </tr> <tr> <td>09/11/2018</td> <td>Martha Claus 245 El Dorado Way Pismo Beach, CA 93449</td> <td><input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC</td> <td>Retired</td> <td>500.00</td> <td>500.00</td> </tr> <tr> <td>09/11/2018</td> <td>Joseph Visci 245 El Dorado Way Pismo Beach, CA 93449</td> <td><input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC</td> <td>Retired</td> <td>500.00</td> <td>500.00</td> </tr> <tr> <td>09/12/2018</td> <td>Nancy Johnson 149 Palm Court Drive Santa Maria, CA 93454</td> <td><input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC</td> <td>Retired</td> <td>300.00</td> <td>300.00</td> </tr> <tr> <td>09/14/2018</td> <td>Juanita Nichols 2580 Bridle Trails Ln Santa Maria, CA 93454</td> <td><input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC</td> <td>Retired</td> <td>150.00</td> <td>150.00</td> </tr> <tr> <td></td> <td></td> <td></td> <td></td> <td></td> <td>SUBTOTAL \$ 1,950.00</td> </tr> </tbody> </table>						DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE	IF INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	09/07/2018	Planned Parenthood Action Fund 518 Garden Street Santa Barbara, CA 93101 ID: 1278950	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		500.00	500.00	09/11/2018	Martha Claus 245 El Dorado Way Pismo Beach, CA 93449	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Retired	500.00	500.00	09/11/2018	Joseph Visci 245 El Dorado Way Pismo Beach, CA 93449	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Retired	500.00	500.00	09/12/2018	Nancy Johnson 149 Palm Court Drive Santa Maria, CA 93454	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Retired	300.00	300.00	09/14/2018	Juanita Nichols 2580 Bridle Trails Ln Santa Maria, CA 93454	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Retired	150.00	150.00						SUBTOTAL \$ 1,950.00
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE	IF INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)																																										
09/07/2018	Planned Parenthood Action Fund 518 Garden Street Santa Barbara, CA 93101 ID: 1278950	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		500.00	500.00																																										
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					SUBTOTAL \$ 1,950.00																																										

Schedule A
Monetary Contributions Received

Amounts may be rounded to whole dollars.

Statement covers period from <u>01/01/2018</u> through <u>09/22/2018</u>		Page <u>15</u> of <u>32</u>	
NAME OF FILER Gloria Soto for Santa Maria City Council District 3 2018		I.D. NUMBER 1407086	
SEE INSTRUCTIONS ON REVERSE		STATEMENT OF EXPENSES NAME OF COMMITTEE, ALSO ENTER I.D. NUMBER)	
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE	IF INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)
09/14/2018	Ted Rhodes 180 Ocean View Ave Carpinteria CA 93013	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Photographer Ted Rhodes
09/17/2018	James Kyriaco for Goleta City Council 226 East Canon Perdido Street #D Santa Barbara, CA 93101 ID: 1401816	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	
09/17/2018	Abraham Melendrez 1803 Citrus Court Santa Maria, CA 93458	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Organizer Cause
09/17/2018	Julie Mickelberry 5118 Evalia Ln Santa Barbara, CA 93111	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Vice President of Community Planned Parenthood
09/17/2018	Monique Limon for Assembly 1787 Tribune Road #K Sacramento, CA 95815 ID: 1392511	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	
		SUBTOTAL \$ 1,250.00	

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Schedule A Monetary Contributions Received

Amounts may be rounded to whole dollars.

Statement covers period from <u>01/01/2018</u> through <u>09/22/2018</u>		CALIFORNIA FORM 460	
		I.D. NUMBER 1407086	PER ELECTION TO DATE (IF REQUIRED)
		CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	
		AMOUNT RECEIVED THIS PERIOD	
		IF INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	
		CONTRIBUTOR CODE	
		<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Retired
DATE RECEIVED	FULL NAME STREET ADDRESS AND ZIP CODE OF (IF COMMITTEE, ALSO ENTER I.D. NUMBER)		
09/19/2018	Anne Schowे 930 Monte Drive Santa Barbara, CA 93110		
09/21/2018	Katie Davis 1144 North Fairview Avenue Goleta, CA 93117		
09/21/2018	Tania Israel 1011 Mission Ridge Road Santa Barbara, CA 93103		
09/21/2018	Hannah-Beth Jackson 744 Woodland Drive Santa Barbara, CA 93108		
09/21/2018	Jonathan Abboud for SBCC Trustee 226 East Canon Perdido Street #D Santa Barbara, CA 93101 ID: 1408077		
SEE INSTRUCTIONS ON REVERSE NAME OF FILER		to whole dollars.	

SUBTOTAL \$ 1,200.00

For more information, contact the Small Business and Entrepreneurship Council at 202-289-1000 or visit www.sbe.org.
FPPC Advice: advice@fppc.ca.gov (866/275-3772)
www.fppc.ca.gov

Schedule A Monetary Contributions Received

Amounts may be rounded to whole dollars.

Schedule A **Monetary Contributions Received**

Amounts may be rounded to whole dollars.

Schedule A	
Monetary Contributions Received	
SEE INSTRUCTIONS ON REVERSE	
NAME OF FILER	
Gloria Soto for Santa Maria City Council District 3 2018	
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER .D. NUMBER)
CONTRIBUTOR CODE	IF INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF- EMPLOYED, ENTER NAME OF BUSINESS)
<input type="checkbox"/> IND	AMOUNT RECEIVED THIS PERIOD
<input type="checkbox"/> COM	
<input checked="" type="checkbox"/> OTH	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)
<input type="checkbox"/> PTY	
<input type="checkbox"/> SCC	.00
I.D. NUMBER 1407086	
Page 18 of 32	
Statement covers period from 01/01/2018 through 09/22/2018	
PER ELECTION TO DATE (IF REQUIRED)	

SEE INSTRUCTIONS ON REVERSE
NAME OF ELIFER

Schedule A Summary

1. Amount received this period - itemized monetary contributions.
(Include all Schedule A subtotals.) — — — — —
2. Amount received this period - unitemized monetary contribution
3. Total monetary contributions received this period.
(Add Lines 1 and 2. Enter here and on the Summary Page. Col

* Contributor Codes

IND - Individual
COM - Recipient Committee
(other than PTY or SCC)
OTH - Other (e.g., business entity)
PTY - Political Party
SCC - Small Contributor Committee

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Schedule B - Part 1
Loans Received

Amounts may be rounded
to whole dollars.

SCHEDULE B - PART 1
CALIFORNIA 460
FORM

Statement covers period
from 01/01/2018
through 09/22/2018

NAME OF FILER
SEE INSTRUCTIONS ON REVERSE

Gloria Soto for Santa Maria City Council District 3 2018

FULL NAME, STREET ADDRESS AND ZIP CODE OF LENDER (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	IF INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF- EMPLOYED, ENTER NAME OF BUSINESS)	(a) OUTSTANDING BALANCE BEGINNING THIS PERIOD	(b) AMOUNT RECEIVED THIS PERIOD	(c) AMOUNT PAID OR FORGIVEN THIS PERIOD **	(d) OUTSTANDING BALANCE AT CLOSE OF THIS PERIOD	(e) INTEREST PAID THIS PERIOD	(f) ORIGINAL AMOUNT OF LOAN	(g) CUMULATIVE CONTRIBUTIONS TO DATE
Gloria Soto 818 W Danie Drive Santa Maria, CA 93458	Planned Parenthood Regional Development	\$.00	\$ 500.00	<input type="checkbox"/> PAID \$.00 <input type="checkbox"/> FORGIVEN \$.00	\$ 500.00	0.00 RATE	\$ 500.00	\$ 525.00 PER ELECTION*
<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC								

*X IND COM OTH PTY SCC

I.D. NUMBER
1407086

Schedule B Summary

1. Loans received this period
(Total Column (b) plus unitemized loans of less than \$100.)
----- \$ 500.00
2. Loans paid or forgiven this period
(Total Column (c) plus loans under \$100 paid or forgiven)
(Include loans paid by a third party that are also itemized on Schedule A.)
----- \$.00
3. Net change this period. (Subtract Line 2 from Line 1.)
Enter the net here and on the Summary Page, Column A, Line 2
----- \$ 500.00
(May be a negative number)

SUBTOTALS

\$ 500.00 \$ 0.00 \$ 500.00 \$.00

*Amounts forgiven or paid by another party also must be reported on Schedule A

** If required.

(Enter (e) on
Schedule E, Line 3)

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www.fppc.ca.gov

* Contributor Codes

IND - Individual
COM - Recipient Committee
(other than PTY or SCC)
OTH - Other (e.g., business entity)
PTY - Political Party
SCC - Small Contributor Committee

Schedule B - Part 2 Loans Received

Amounts may be rounded to whole dollars.

SUBTOTAL \$ _____ Enter on Summary
Page, Line 17 only.

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**Schedule C
Nonmonetary Contributions Received**

Amounts may be rounded to whole dollars.

CALIFORNIA 460 FORM		Statement covers period from <u>01/01/2018</u> through <u>09/22/2018</u>		Page <u>21</u> of <u>32</u>	
Nonmonetary Contributions Received <small>Amounts may be rounded to whole dollars.</small>		I.D. NUMBER 1407086			
NAME OF FILER Gloria Soto for Santa Maria City Council District 3 2018		SEE INSTRUCTIONS ON REVERSE			
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	DESCRIPTION OF GOODS OR SERVICES	AMOUNT/FAIR MARKET VALUE
				<input type="checkbox"/> IND	<input type="checkbox"/> COM
				<input type="checkbox"/> OTH	<input type="checkbox"/> PTY
				<input type="checkbox"/> SCC	

SEE INSTRUCTIONS ON REVERSE
NAME OF FIGURE

Schedule C Summary

1. Amount received this period - itemized nonmonetary contributions.
(Include all Schedule C subtotals.) ----- \$ ----- .00

2. Amount received this period - unitIALIZED nonmonetary contributions of less than \$100 ----- \$ ----- .00

3. Total nonmonetary contributions received this period.
(Add lines 1 and 2. Enter here and on the Summary Page Column A | lines 4 and 10) ----- \$ ----- .00

SUBTOTAL \$

FPPC Form 460 (Jan/2016)
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www.fppc.ca.gov

Schedule D
Summary of Expenditures
Supporting/Opposing Other
Candidates, Measures, and Committees

Amounts may be rounded
to whole dollars.

NAME OF FILER		Statement covers period		CALIFORNIA FORM 460	
DATE	NAME OF CANDIDATE, OFFICE, AND DISTRICT, OR MEASURF NUMBER OR LETTER AND JURISDICTION, OR COMMITTEE	from	01/01/2018	through	09/22/2018
08/29/2018	Planned Parenthood Action Fund	<input checked="" type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure		AMOUNT THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)
DISTRICT #:		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		250.00	250.00

SCHEDULE D	Page <u>22</u> of <u>32</u>
PER ELECTION TO DATE (IF REQUIRED)	
I.D. NUMBER 1407086	

SCHEDULE D SUMMARY

1. Itemized contributions and independent expenditures made this period. (Include all Schedule D subtotals.) ----- \$ 250.00
2. Unitemized contributions and independent expenditures made this period of under \$100 ----- \$.00
3. Total contributions and independent expenditures made this period. (Add Lines 1 and 2. Do not enter on the Summary Page.) ----- **250.00** **TOTAL \$ 250.00**

Schedule E Payments Made

Amounts may be rounded
to whole dollars.

CALIFORNIA 460 FORM

Statement covers period from <u>01/01/2018</u>	through <u>09/22/2018</u>	Page <u>23</u> of <u>32</u>
NAME OF FILER Gloria Soto for Santa Maria City Council District 3 2018		I.D. NUMBER 1407086

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
Gloria Soto for Santa Maria City Council District 3 2018

CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

CMP campaign paraphernalia/misc.	MBR member communications
CNS campaign consultants	MTG meetings and appearances
CTB contribution (explain nonmonetary)*	OFC office expenses
CVC civic donations	PET petition on circulating
FIL candidate filing/ballot fees	PHO phone banks
FND fundraising events	POL polling and survey research
IND independent expenditure supporting/opposing others (explain)*	POS postage, delivery and messenger services
LEG legal defense	PRO professional services (legal, accounting)
LIT campaign literature and mailings	FRT print ads

NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Brandt Media 6829 Sabado Tarde Road Goleta, CA 93117	CNS		425.00
Local Copies etc 1500 South Broadway Santa Maria, CA 93454	LIT		320.33
Union Graphics 9960 Glenoaks Boulevard #A Los Angeles, CA 91352	LIT		275.90
Integrated Solutions: Political 4142 Adams Avenue Suite 103-550 San Diego, CA 92116	OFC		167.74
			SUBTOTAL: \$ 1,188.97

* Payments that are contributions or independent expenditures must also be summarized on Schedule D.

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Schedule E Payments Made

Amounts may be rounded
to whole dollars.

NAME OF FILER Gloria Soto for Santa Maria City Council District 3 2018		SEE INSTRUCTIONS ON REVERSE	
Statement covers period from <u>01/01/2018</u> through <u>09/22/2018</u>		Page <u>24</u> of <u>32</u>	
		I.D. NUMBER 1407086	

CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

CMP campaign paraphernalia/misc.
CNS campaign consultants
CTB contribution (explain nonmonetary)*
CVC civic donations
FIL candidate filing/ballot fees
FND fundraising events
IND independent expenditure supporting/opposing others (explain)*
LEG legal defense
LIT campaign literature and mailings

MRB member communications
MTG meetings and appearances
OFC office expenses
PET petition circulating
PHO phone banks
POL polling and survey research
POS postage, delivery and messenger services
PRO professional services (legal, accounting)
PRT print ads

RAD radio airtime and production costs
RFD returned contributions
SAL campaign workers' salaries
TEL t.v. or cable airtime and production costs
TRC candidate travel, lodging, and meals
TRS staff/spouse travel, lodging, and meals
TSF transfer between committees of the same candidate/sponsor
VOT voter registration
WEB information technology costs (internet, e-mail)

NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)*	CODE OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
City Of Santa Maria 110 South Pine Street Santa Maria, CA 93458	FIL		1,000.00
Alan Hancock College 800 South College Drive #H102 Santa Maria, CA 93454	LIT		347.11
Local Copies etc 1600 South Broadway Santa Maria, CA 93454	LIT		90.99
Super Cheap Signs 9200 Waterford Centre Boulevard Suite 100 Austin, TX 78758	CMP		382.34
			SUBTOTAL \$ 1,820.44

* Payments that are contributions or independent expenditures must also be summarized on Schedule D.

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Schedule E Payments Made

Amounts may be rounded
to whole dollars.

SCHEDULE E

CALIFORNIA 460

FORM

NAME OF FILER Gloria Soto for Santa Maria City Council District 3 2018	SEE INSTRUCTIONS ON REVERSE
Statement covers period from <u>01/01/2018</u> through <u>09/22/2018</u>	Page <u>25</u> of <u>32</u>
I.D. NUMBER 1407086	

CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

CMP campaign paraphernalia/misc
CNS campaign consultants
CTB contribution (explain nonmonetary)*
CVC civic donations
FIL candidate filing/ballot fees
FND fundraising events
IND independent expenditure supporting/opposing others (explain)*
LEG legal defense
LIT campaign literature and mailings
MBR member communications
MTG meetings and appearances
OFC office expenses
PET petition circulating
PHO phone banks
POL polling and survey research
POS postage, delivery and messenger services
PRO professional services (legal, accounting)
PRT print ads
RAD radio airtime and production costs
RFD returned contributions
SAL campaign workers' salaries
TEL t.v. or cable airtime and production costs
TRC candidate travel, lodging, and meals
TRS staff/spouse travel, lodging, and meals
TSF transfer between committees of the same candidate/sponsor
VOT voter registration
WEB information technology costs (internet, e-mail)

NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Super Cheap Signs 9200 Waterford Centre Boulevard Suite 100 Austin, TX 78758	CMP		1,524.99
Brandt Media 6829 Sabado tarde Road Goleta, CA 93117	CNS		400.00
Local Copies etc 1500 South Broadway Santa Maria, CA 93454	LIT		80.19
Planned Parenthood Action Fund 518 Garden Street Santa Barbara, CA 93101 ID: 1278950	CTB		250.00
			SUBTOTAL \$ 2,255.18

* Payments that are contributions or independent expenditures must also be summarized on Schedule D.

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Schedule E Payments Made

Amounts may be rounded
to whole dollars.

SCHEDULE E CALIFORNIA FORM 460

SEE INSTRUCTIONS ON REVERSE
NAME OF FILER

Gloria Soto for Santa Maria City Council District 3 2018

CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

CMP campaign paraphernalia/misc.
CNS campaign consultants
CTB contribution (explain nonmonetary)*
CVC civic donations
FIL candidate filing/ballot fees
FND fundraising events
IND independent expenditure supporting/opposing others (explain)*
LEG legal defense
LIT campaign literature and mailings
MBR member communications
MTG meetings and appearances
OFC office expenses
PET petition circulating
PHO phone banks
POL polling and survey research
POS postage, delivery and messenger services
PRO professional services (legal, accounting)
PRT print ads
RAD radio airtime and production costs
RFD returned contributions
SAL campaign workers' salaries
TEL t.v. or cable airtime and production costs
TRC candidate travel, lodging, and meals
TRS staff/spouse travel, lodging, and meals
TSF transfer between committees of the same candidate/sponsor
VOT voter registration
WEB information technology costs (internet, e-mail)

NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR LIT	DESCRIPTION OF PAYMENT OFC	AMOUNT PAID 355.61
Alan Hancock College 800 South College Drive #H102 Santa Maria, CA 93454	LIT		355.61
First Data 5565 Glenridge Connector NE Suite 2000 Atlanta, GA 30342	LIT		117.77
Integrated Solutions: Political 4142 Adams Avenue Suite 103-550 San Diego, CA 92116	OFC		100.00
Local Copies etc 1500 South Broadway Santa Maria, CA 93454	LIT		21.38

* Payments that are contributions or independent expenditures must also be summarized on Schedule D.

SUBTOTAL \$ 594.76

FPPC Form 460 (Jan 2016)

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Schedule E Payments Made

Amounts may be rounded
to whole dollars.

SCHEDULE E CALIFORNIA FORM 460

SEE INSTRUCTIONS ON REVERSE
NAME OF FILER

Gloria Soto for Santa Maria City Council District 3 2018

CODES. If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

CMP campaign paraphernalia/misc.
CNS campaign consultants
CTB contribution (explain nonmonetary)*
CVC civic donations
FIL candidate filing/ballot fees
FND fundraising events
IND independent expenditure supporting/opposing others (explain)*
LEG legal defense
LIT campaign literature and mailings
MBR member communications
MTG meetings and appearances
OFC office expenses
PET petition circulating
PHO phone banks
POL polling and survey research
POS postage, delivery and messenger services
PRO professional services (legal, accounting)
PRT print ads
RAD radio airtime and production costs
RFD returned contributions
SAL campaign workers' salaries
TEL t.v. or cable airtime and production costs
TRC candidate travel, lodging, and meals
TRS staff/spouse travel, lodging, and meals
TSF transfer between committees of the same candidate/sponsor
VOT voter registration
WEB information technology costs (internet, e-mail)

NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER/FI)	CODE OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Vtc Enterprises 124 North 1 Street Lompoc, CA 93436	CMP		239.04
Santa Maria Chamber of Commerce 614 South Broadway Santa Maria, CA 93454	CVC		170.00
C&I Consulting 226 East Canon Perdido Street Santa Barbara, CA 93101	CNS		1,375.00
Expedia 333 108th Avenue Northeast Bellevue, WA 98004	TRC	Lodging	220.61
			SUBTOTAL \$ 2,004.65

* Payments that are contributions or independent expenditures must also be summarized on Schedule D.

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Schedule E Payments Made

Amounts may be rounded
to whole dollars.

SEE INSTRUCTIONS ON REVERSE NAME OF FILER		Statement covers period from <u>01/01/2018</u> through <u>09/22/2018</u>	CALIFORNIA 460 FORM	Page <u>28</u> of <u>32</u>
		I.D. NUMBER 1407086		

Gloria Soto for Santa Maria City Council District 3 2018

CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

CMP campaign paraphernalia/misc.
CNS campaign consultants
CTC contribution (explain nonmonetary)*
CVC civic donations
FLI candidate filing/ballot fees
FND fundraising events
IND independent expenditure supporting/opposing others (explain)*
LEG legal defense
LIT campaign literature and mailings

MBR member communications
MTG meetings and appearances
OFC office expenses
PET petition circulating
PHO phone, banks
PO_ polling and survey research
POS postage, delivery and messenger services
PRO professional services (legal, accounting)
PRT print ads

RAD radio airtime and production costs
RFD returned contributions
SAL campaign workers' salaries
TEL t.v. or cable airtime and production costs
TRC candidate travel, lodging, and meals
TRS staff/spouse travel, lodging, and meals
TSF transfer between committees of the same candidate/sponsor
VOT voter registration
WEB information technology costs (internet, e-mail)

NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Super Cheap Signs 9200 Waterford Centre Boulevard Suite 100 Austin, TX 78758	CMP			370.60
Allan Hancock College 800 South College Drive H102 Santa Maria, CA 93454	LIT			697.98

Schedule E Summary

1. Itemized payments made this period. (Include all Schedule E subtotals.) — — — — — \$ 8,932.58
2. Unitemized payments made this period of under \$100 — — — — — \$ 618.26
3. Total interest paid this period on loans. (Enter amount from Schedule B, Part 1, Column (e).) — — — — — \$.00
4. Total payments made this period. (Add Lines 1, 2, and 3. Enter here and on the Summary Page, Column A, Line 6.) — — — — — **TOTAL \$ 9,550.84**

* Payments that are contributions or independent expenditures must also be summarized on Schedule D.

**Schedule F
Accrued Expenses (Unpaid Bills)**

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Statement covers period from <u>01/01/2018</u>	through <u>09/22/2018</u>
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Amounts may be rounded
to whole dollars.

SEE INSTRUCTIONS ON REVERSE
NAME OF FILER

Gloria Soto for Santa Maria City Council District 3 2018

CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

CMF	campaign paraphernalia/misc.
CNS	campaign consultants
CTB	contribution (explain nonmonetary)*
CYC	civic donations
FIL	candidate filing/ballot fees
FND	fundraising events
IND	independent expenditure supporting/opposing others (explain)*
LEG	legal defense
LIT	campaign literature and mailings

(a) NAME AND ADDRESS OF CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR DESCRIPTION OF PAYMENT	(b) OUTSTANDING BALANCE BEGINNING OF THIS PERIOD	(c) AMOUNT INCURRED THIS PERIOD		(d) OUTSTANDING BALANCE AT CLOSE OF THIS PERIOD
			(b) AMOUNT INCURRED THIS PERIOD	(c) AMOUNT PAID THIS PERIOD (ALSO REPORT ON E)	

SCHEDULE F SUMMARY

- Total accrued expenses incurred this period. (Include all Schedule F, Column (b) subtotals for accrued expenses of \$100 or more, plus total unitemized accrued expenses under \$100.) **INCURRED TOTALS \$.00**
- Total accrued expenses paid this period. (Include all Schedule F, Column (c) subtotals for payments on accrued expenses of \$100 or more, plus total unitemized payments on accrued expenses under \$100.) **PAID TOTALS \$.00**
- Net change this period. (Subtract Line 2 from Line 1. Enter the difference here and on the Summary Page, Column A, Line 9.) **NET \$.00**

*Payments that are contributions or independent expenditures must also be summarized on Schedule D.

Schedule G
Payments Made by an Agent or Independent Contractor (on Behalf of This Committee)

Amounts may be rounded to whole dollars.

SEE INSTRUCTIONS ON REVERSE
 NAME OF FILER
Gloria Soto for Santa Maria City Council District 3 2018
 NAME OF AGENT OR INDEPENDENT CONTRACTOR

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FORM	
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I.D. NUMBER
1407086

CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

CMP	campaign paraphernalia/misc.	MBR	member communications	RAD	radio airtime and production costs
CNS	campaign consultants	MTG	meetings and appearances	RFD	returned contributions
CTB	contribution (explain nonmonetary)*	OFC	office expenses	SAL	campaign workers' salaries
CVC	civic donations	PET	petition circulating	TEL	t.v. or cable airtime and production costs
FIL	candidate filing/ballot fees	PHO	phone banks	TRC	candidate travel, lodging, and meals
FND	fundraising events	POL	polling and survey research	TRS	staff/spouse travel, lodging, and meals
IND	independent expenditure supporting/opposing others (explain)*	POS	postage, delivery and messenger services	TSF	transfer between committees of the same candidate/sponsor
LEG	legal defense	PRO	professional services (legal, accounting)	VOT	voter registration
LIT	campaign literature and mailings	PRT	print ads	WEB	information technology costs (internet, e-mail)

NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR CODE	DESCRIPTION OF PAYMENT	AMOUNT PAID

* Payments that are contributions or independent expenditures must also be summarized on Schedule D.

** Do not transfer to any other schedule or to the Summary Page. This total may not equal the amount paid to the agent or independent contractor as reported on Schedule E.

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TOTAL * \$

FPPC Form 460 (Jan/2016)
 FPPC Advice: advice@fppc.ca.gov (866/275-3772)
www.fppc.ca.gov

Schedule H
Loans Made to Others*

Amounts may be rounded
to whole dollars.

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SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Gloria Soto for Santa Maria City Council District 3 2018

NAME OF FILER FULL NAME, STREET ADDRESS AND ZIP CODE OF RECIPIENT (IF COMMITTEE, ALSO ENTER I.D. NUMBER)		(a) OUTSTANDING BALANCE BEGINNING THIS PERIOD	(b) AMOUNT LOANED THIS PERIOD	(c) REPAYMENT OR FORGIVENESS THIS PERIOD*	(d) OUTSTANDING BALANCE AT CLOSE OF THIS PERIOD	(e) INTEREST RECEIVED	(f) ORIGINAL AMOUNT OF LOAN	(g) CUMULATIVE LOANS TO DATE
				<input type="checkbox"/> PAID \$ _____	<input type="checkbox"/> FORGIVEN \$ _____	<input type="checkbox"/> RATE \$ _____	<input type="checkbox"/> PER ELECTION** \$ _____	CALENDAR YEAR
				<input type="checkbox"/> PAID \$ _____	<input type="checkbox"/> FORGIVEN \$ _____	<input type="checkbox"/> RATE \$ _____	<input type="checkbox"/> PER ELECTION** \$ _____	DATE INURRED
				<input type="checkbox"/> PAID \$ _____	<input type="checkbox"/> FORGIVEN \$ _____	<input type="checkbox"/> RATE \$ _____	<input type="checkbox"/> PER ELECTION** \$ _____	

SUBTOTALS	\$	\$	\$	\$	\$	\$	\$	
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www.fppc.ca.gov

*Loans that are contributions to another candidate or committee must also be
summarized on Schedule D. Loans forgiven must also be reported on Schedule E

Schedule I
Miscellaneous Increases to Cash

Amounts may be rounded
to whole dollars.

SCHEDULE I
CALIFORNIA 460
FORM

Statement covers period
from 01/01/2018
through 09/22/2018

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NAME OF FILER		SEE INSTRUCTIONS ON REVERSE	DATE RECEIVED	FULL NAME AND ADDRESS OF SOURCE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	DESCRIPTION OF RECEIPT	AMOUNT OF INCREASE TO CASH
Gloria Soto for Santa Maria City Council District 3 2018						

Schedule I Summary

1. Itemized increases to cash this period. ----- \$.00
2. UnitIALIZED increases to cash of under \$100 this period. ----- \$ 25.10
3. Total of all interest received this period on loans made to others. (Schedule H, Column (e).) ----- \$.00
4. Total miscellaneous increases to cash this period. (Add Lines 1, 2, and 3. Enter here and on the Summary Page, Line 14.) ----- **TOTAL \$ 25.10**

SUBTOTAL \$

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www.fppc.ca.gov